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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

7

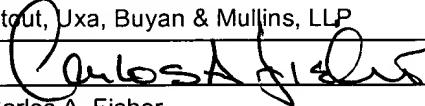
Application Number	09/903,954
Filing Date	July 12, 2001
First Named Inventor	GARST
Group Art Unit	1618
Examiner Name	Fay, Z.

Attorney Docket Number A05009CIPCON

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final 7/10/06	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Stout, Uxa, Buyan & Mullins, LLP		
Signature			
Printed Name	Carlos A. Fisher		
Date	7/7/06	Reg. No.	36,510

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO at fax number 571-273-8300, or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Alicia Curran	Date	7/7/06

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Docket No. 17095CIPCON(AP)

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Garst, Michael E.) Group Art Unit: 1618
Serial No: 09/903,954)
Conf. No.: 3028)
Filed: July 12, 2001)
For: Combinations of Prostaglandins)
and Brimonidine or Derivatives)
Thereof)

AMENDMENT PURSUANT TO 37 CFR §41.33

Mail Stop AF

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This amendment is being filed after the filing of a Notice of Appeal, and before the filing of an Appeal Brief. The amendment's sole purpose is to place the claims in better form for consideration on appeal.

The **Status of the Claims** appear on page 2 of this paper.

The Remarks begin on page 6 of this paper.

CERTIFICATE OF MAILING

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: BOX AF, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA, 22313-1450 ON July 7, 2006.
PRINTED NAME OF PERSON MAKING DEPOSIT: Alicia Curran;
SIGNATURE OF PERSON MAKING DEPOSIT: Alicia Curran DATE: 7/7/06